PCA UPDATE

ADRENOCORTICAL INSUFFICIENCY SECONDARY TO PREVIOUS TREATMENT WITH ADRENAL CORTICOSTEROIDS

October, 1998

All health care facilities are reminded that patients previously treated with systemic adrenal corticosteroids may have latent secondary adrenocortical insufficiency that can cause sudden vascular collapse when they undergo major stress from trauma, surgery or other acute medical and surgical conditions.

A number of cases have recently come to the attention of the Board's Patient Care Assessment (PCA) Committee in which post-operative patients died of undiagnosed and untreated adrenocortical insufficiency caused by chronic oral steroid therapy in the recent past. An adequate pre-operative history and appropriate prophylactic treatment with adrenal steroids would probably have prevented their deaths.

This is an old story, of course, but its lesson should never be forgotten. Health care facilities should include an inquiry about past steroid therapy as part of their routine protocol for pre-operative evaluation, and they should consider adding this question to other appropriate forms. Furthermore, the possibility of iatrogenic secondary adrenocortical insufficiency should always be considered in patients with otherwise unexplained vascular collapse.

It is not the PCA Committee's function to prescribe in detail the diagnosis or management of this or any other specific medical problem; that is the responsibility of the health care facility's medical staff. The purpose of this Update is simply to remind facilities that this problem still exists and to recommend that relevant forms and protocols be reviewed with this fact in mind.